

PTO/SB/22 (08-03)

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 16270J-004741US
In re Application of Dale B. Schenk		
Application Number 09/723,713	Filed November 27, 2000	
For PREVENTION AND TREATMENT OF AMYLOIDOGENIC DISEASE		
Art Unit 1632	Examiner Anne Marie Sabrina Wehbe	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

☐ One month (37 CFR 1.17(a)(1)) \$

☒ Two months (37 CFR 1.17(a)(2)) \$420

☐ Three months (37 CFR 1.17(a)(3)) \$

☐ Four months (37 CFR 1.17(a)(4)) \$

☐ Five months (37 CFR 1.17(a)(5)) \$

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ .

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 42,397

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.84(a). \_\_\_\_\_

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

March 24, 2004  
Date

Rosemarie L. Celli  
Signature

Rosemarie L. Celli, Reg. No. 42,397  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 form is submitted.

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